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APPLICANTS

Joshua C. Lockwood, Bellflower, CA;
 Tramale Chatman, Bellflower, CA;

** CONTINUING DATA ***** *NA*

** FOREIGN APPLICATIONS ***** *NA*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>NA</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 8	TOTAL CLAIMS 5	INDEPENDENT CLAIMS 1
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ADDRESS
 Curtis L. Harrington
 Suite 250
 6300 State University Drive
 Long Beach, CA
 90815

TITLE
 Steady table

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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